Fill in this information to identify your case:

Debtor 1   **Logan Malone Thom**
‾‾‾
First Name   Middle Name   Last Name

Debtor 2
(Spouse if, filing) ‾‾‾
First Name   Middle Name   Last Name

United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO

Case number   **19-52968**
(if known)

■ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information   12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1:	Summarize Your Assets

	Your assets Value of what you own
1. **Schedule A/B: Property** (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B...	$ 0.00
1b. Copy line 62, Total personal property, from Schedule A/B...	$ 3,964.56
1c. Copy line 63, Total of all property on Schedule A/B..	$ 3,964.56

Part 2:	Summarize Your Liabilities

	Your liabilities Amount you owe
2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D) 2a. Copy the total you listed in Column A, *Amount of claim,* at the bottom of the last page of Part 1 of *Schedule D...*	$ 695.56
3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of *Schedule E/F*...............................	$ 0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of *Schedule E/F*...........................	$ 18,963.29
Your total liabilities	$ 19,658.85

Part 3:	Summarize Your Income and Expenses

| 4. *Schedule I: Your Income* (Official Form 106I)
Copy your combined monthly income from line 12 of *Schedule I*.. | $ 583.00 |
| 5. *Schedule J: Your Expenses* (Official Form 106J)
Copy your monthly expenses from line 22c of *Schedule J*.. | $ 1,287.00 |

Part 4:	Answer These Questions for Administrative and Statistical Records

6. **Are you filing for bankruptcy under Chapters 7, 11, or 13?**

☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

■ Yes

7. **What kind of debt do you have?**

■ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

☐ **Your debts are not primarily consumer debts**. You have nothing to report on this part of the form. *Check this box* and submit this form to the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income***:** Copy your total current monthly income from Official Form
    122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. $ _____ **0.00**

9. **Copy the following special categories of claims from Part 4, line 6 of** *Schedule E/F***:**

From Part 4 on *Schedule E/F*, copy the following:	Total claim
9a. Domestic support obligations (Copy line 6a.)	$ _____ **0.00**
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	$ _____ **0.00**
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	$ _____ **0.00**
9d. Student loans. (Copy line 6f.)	$ _____ **0.00**
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	$ _____ **0.00**
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+$ _____ **0.00**
9g. **Total.** Add lines 9a through 9f.	$ _____ **0.00**

Fill in this information to identify your case:

Debtor 1	**Logan Malone Thom**		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name

United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO

Case number   **19-52968**
(if known)

■ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims   12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1:   List All of Your PRIORITY Unsecured Claims

1. **Do any creditors have priority unsecured claims against you?**

   ■ No. Go to Part 2.

   ☐ Yes.

Part 2:   List All of Your NONPRIORITY Unsecured Claims

3. **Do any creditors have nonpriority unsecured claims against you?**

   ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.

   ■ Yes.

4. **List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

		Total claim

4.1	**Anthony M. Stewart**	Last 4 digits of account number	**Unknown**

Nonpriority Creditor's Name

412 Elm St.
Canal Fulton, OH 44614

Number Street City State Zip Code

When was the debt incurred?   **1/8/2019**

Who incurred the debt? Check one.

As of the date you file, the claim is: Check all that apply

■ Debtor 1 only   ☐ Contingent

☐ Debtor 2 only   ☐ Unliquidated

☐ Debtor 1 and Debtor 2 only   ☐ Disputed

☐ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

☐ **Check if this claim is for a community debt**

☐ Student loans

Is the claim subject to offset?

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

■ No

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify   **Civil claim for damages resulting from traffic accident on 1/8/2019**

| 4.2 | **Citizens Bank** | Last 4 digits of account number | **xxxx** | **$3,751.00** |

Nonpriority Creditor's Name
1 Citizens Plaza
Providence, RI 02903
Number Street City State Zip Code

When was the debt incurred?   **2017-2018**

Who incurred the debt? Check one.

As of the date you file, the claim is: Check all that apply

- ■ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

- ■ No
- ☐ Yes

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ■ Other. Specify   **Credit card purchases**

| 4.3 | **Cleveland Clinic** | Last 4 digits of account number | **7784** | **$2,500.00** |

Nonpriority Creditor's Name
P.O. Box 89410
Cleveland, OH 44101-6410
Number Street City State Zip Code

When was the debt incurred?   **1/8/2019**

Who incurred the debt? Check one.

As of the date you file, the claim is: Check all that apply

- ■ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

- ■ No
- ☐ Yes

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ■ Other. Specify   **Medical expenses**

| 4.4 | **Ian Rogers** | Last 4 digits of account number | | **Unknown** |

Nonpriority Creditor's Name
3030 Derling Rd.
Akron, OH 44319
Number Street City State Zip Code

When was the debt incurred?   **1/8/2019**

Who incurred the debt? Check one.

As of the date you file, the claim is: Check all that apply

- ■ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

- ■ No
- ☐ Yes

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ■ Other. Specify   **Civil claim for damages resulting from traffic accident on 1/8/2019**

| 4.5 | **Joseph Keifer** | Last 4 digits of account number | **Unknown** |

Nonpriority Creditor's Name

1100 Shannon Ave.
Barberton, OH 44203

Number Street City State Zip Code

When was the debt incurred?   **1/8/2019**

Who incurred the debt? Check one.

■ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

■ No

☐ Yes

As of the date you file, the claim is: Check all that apply

☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify   **Civil claim for damages resulting from traffic accident on 1/8/2019**

| 4.6 | **Nationwide Insurance** | Last 4 digits of account number | **Unknown** |

Nonpriority Creditor's Name

1 Nationwide Plaza
Columbus, OH 43215-2220

Number Street City State Zip Code

When was the debt incurred?   **1/8/2019**

Who incurred the debt? Check one.

■ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

■ No

☐ Yes

As of the date you file, the claim is: Check all that apply

☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify   **Civil claim for damages resulting from traffic accident on 1/8/2019**

| 4.7 | **Westfield Insurance** | Last 4 digits of account number | **$12,712.29** |

Nonpriority Creditor's Name

1 Park Cir.
Westfield Center, OH 44251

Number Street City State Zip Code

When was the debt incurred?   **1/8/2019**

Who incurred the debt? Check one.

■ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

■ No

☐ Yes

As of the date you file, the claim is: Check all that apply

☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify   **Civil claim for damages resulting from 1/8/2019 traffic accident**

| **Part 3:** | **List Others to Be Notified About a Debt That You Already Listed** |

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address   On which entry in Part 1 or Part 2 did you list the original creditor?

National Commercial Services   Line **4.6** of (Check one):   ☐ Part 1: Creditors with Priority Unsecured Claims
6644 Valjean Ave.
Suite 100   ■ Part 2: Creditors with Nonpriority Unsecured Claims
Van Nuys, CA 91406

Last 4 digits of account number

Part 4:   Add the Amounts for Each Type of Unsecured Claim

6. **Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.**

				Total Claim
Total claims from Part 1	6a.	**Domestic support obligations**	6a.	$ 0.00
	6b.	**Taxes and certain other debts you owe the government**	6b.	$ 0.00
	6c.	**Claims for death or personal injury while you were intoxicated**	6c.	$ 0.00
	6d.	**Other.** Add all other priority unsecured claims. Write that amount here.	6d.	$ 0.00
	6e.	**Total Priority.** Add lines 6a through 6d.	6e.	$ 0.00

				Total Claim
Total claims from Part 2	6f.	**Student loans**	6f.	$ 0.00
	6g.	**Obligations arising out of a separation agreement or divorce that you did not report as priority claims**	6g.	$ 0.00
	6h.	**Debts to pension or profit-sharing plans, and other similar debts**	6h.	$ 0.00
	6i.	**Other.** Add all other nonpriority unsecured claims. Write that amount here.	6i.	$ 18,963.29
	6j.	**Total Nonpriority.** Add lines 6f through 6i.	6j.	$ 18,963.29

Debtor 1   **Logan Malone Thom**

First Name   Middle Name   Last Name

Debtor 2

(Spouse if, filing)   First Name   Middle Name   Last Name

United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO

Case number   **19-52968**
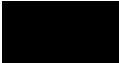
(if known)

☑ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to $250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☑ No

☐ Yes. Name of person _____   Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X **/s/ Logan Malone Thom**   X _____

    Logan Malone Thom   Signature of Debtor 2

    Signature of Debtor 1

    Date   **February 10, 2020**   Date _____

United States Bankruptcy Court
Northern District of Ohio

In re   **Logan Malone Thom**   Case No.   **19-52968**

Debtor(s)   Chapter   **7**

VERIFICATION OF CREDITOR MATRIX - AMENDED

The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date: **February 10, 2020**   **/s/ Logan Malone Thom**

                                             Logan Malone Thom

                                             Signature of Debtor

Anthony M. Stewart
412 Elm St.
Canal Fulton, OH 44614

Citizens Bank
1 Citizens Plaza
Providence, RI 02903

Cleveland Clinic
P.O. Box 89410
Cleveland, OH 44101-6410

Honda Financial Services
P.O. Box 168088
Irving, TX 75016-8088

Ian Rogers
3030 Derling Rd.
Akron, OH 44319

Joseph Keifer
1100 Shannon Ave.
Barberton, OH 44203

National Commercial Services
6644 Valjean Ave.
Suite 100
Van Nuys, CA 91406

Nationwide Insurance
1 Nationwide Plaza
Columbus, OH 43215-2220

Spectrum
1919 Brittain Rd.
Akron, OH 44310

Westfield Insurance
1 Park Cir.
Westfield Center, OH 44251